

## STATE OF WASHINGTON DEPARTMENT OF LABOR AND INDUSTRIES

PO Box 44470 Olympia, WA 98504-4470

Type of Application	Fees	Requirements		
Exam Applicants	\$122.00	✓ Work history on all applications is required		
Journeyman,		✓ Appropriate fee attached		
Residential Specialty Medical Gas		<ul> <li>✓ Work experience affidavit signed and notarized from a registered contractor or union representative. No self-verification permitted. Out of state affidavits must include a copy of contractor license. (for journeyman and residential specialty exams)</li> <li>✓ Copy of picture identification such as driver's license</li> </ul>		
Reciprocal Applicants	\$122.00	✓ Work history on all applications is required		
		✓ Copy of active out of state plumber's license must be		
		attached.		
		✓ Appropriate fee attached		
		✓ Copy of picture identification such as driver's license.		
<b>Medical Gas Endorsement Applications</b>	\$45.00	✓ Work history on all applications is required		
(for first time applications only, if you held an endorsement previously and it has expired past 90 days you are required to take the medical		✓ Medical gas applicants must have an active Washington State		
		Journeyman Card.		
gas exam)		✓ Appropriate fee attached		
		✓ Certificate of completion from department approved medical		
		gas training course or a copy of your active NITC card.		
		✓ Copy of picture identification such as driver's license		
Temporary Permit Applications	\$60.70	✓ Work history on all applications is required		
		✓ Copy of active out of state plumber's license must be		
		attached.		
		✓ Appropriate fee attached		
		✓ Examination application and appropriate fee required		
		✓ Copy of picture identification such as driver's license		

Once an applicant has been approved for certification under the reciprocal agreement or medical gas endorsement application, a notice will be mailed to the applicant requesting an additional pro-rated licensing fee.

### APPLICATIONS MUST BE RECEIVED IN THE OLYMPIA OFFICE TWO WEEKS PRIOR TO REQUESTED EXAMINATION DATE. This allows adequate time to schedule and notify you by mail.

If you have any questions regarding the processing of your application, you may contact this office at the above address or by calling Plumber Certification at (360) 902-5207.

#### INSTRUCTIONS TO ALL APPLICANTS

Fill out the application correctly and completely. Failure to provide the correct information in <u>all</u> of the appropriate sections of the application shall be deemed sufficient cause for rejection of the application by the Plumber Certification Section, Specialty Compliance Services Division.

#### **MEDICAL GAS EXAMINATION APPLICANTS**

The examination is required by regulation (WAC296-400A-022) to evaluate the applicant seeking a medical gas endorsement for the State of Washington.

The examination is designed to measure your knowledge of the requirements of the currently adopted medical gas code.

The established MINIMUM score required to successfully complete the examination is 70%.

The Washington State medical gas examination is based on the NFPA 99C Gas and Vacuum Systems.

#### JOURNEYMAN AND RESIDENTIAL SPECIALTY PLUMBER EXAMINATION APPLICANTS

The examination is required by regulation (RCW 18.106.050) to evaluate the applicant seeking a certificate of competency for the State of Washington as a qualified <u>Journeyman or Residential Specialty plumber</u>.

The examination is designed to measure your ability in these areas of knowledge:

- 1. The general knowledge of technical information and practical procedures which are a necessary part of the trade and calling of a Journeyman or Residential Specialty plumber;
- 2. A specific knowledge of the requirements of the Uniform Plumbing Code with amendments as adopted by the State of Washington and their interpretations.

The examination consists of three parts:

- 1. Technical and general trade knowledge.
- 2. Code application knowledge for waste and vents.
- 3. Code application for water piping.

Note: One, two or more story buildings on drawings for journeyman plumber examination.

The established **MINIMUM** score required to successfully complete the examination is 70% on each of the three parts.

The Washington State plumber's examination is based on the 2003 Uniform Plumbing Code with the Washington State amendments.

You are urged to study the publications thoroughly in preparation for the state plumbers examination.

Inquiries or correspondence may be directed to the Department of Labor and Industries, Plumber Certification Section, PO Box 44470, Olympia WA 98504-4470. Telephone number (360) 902-5207

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#### APPLICATION FOR JOURNEYMAN, RESIDENTIAL SPECIALTY, RECIPROCAL PLUMBER OR MEDICAL GAS INSTALLER'S CERTIFICATE

THE FEE, MADE PAYABLE TO THE DEPARTMENT OF LABOR AND INDUSTRIES, MUST ACCOMPANY THE APPLICATIONS.

\*Evam schedule is listed on E627 027 000 Evam dates and locations.

Exam schedule is fisted on F627-027-000 E.	xam dates and focations.						
Exam applied for (check one only) \$122.00	ential Specialty   Medi	cal Gas Exa	m Date*				
Application applied for \$45.00  Medical Gas Endorsement \$122.00  Reciprocal	S60.70 Temporary I	Permit (exam ap	oplication required)				
Name (type or print)	Telephone number	Birth date	Social Security # (for ID only)				
Address	City		State ZIP+4				
Have you been certified in Washington previously or had a temporary certificate?		s your first application					
Do you have a current plumber trainee certificate?	Yes No If "Y	es", plumber trainee	certificate number				
Are you in an approved plumbing apprenticeship program in Washington?	Yes No	es" apprenticeship I	D number.				
Name of Employer	Address	Date Fron					
	City	State					
Name of Employer	Address	Date	<del></del>				
	City	Fror State					
	City	Stati	211 14				
(Attach an additional list if needed)  To take the <b>RESIDENTIAL SPECIALTY</b> I applicable field. If your affidavits of experier affidavits.							
To take the <b>JOURNEYMAN EXAMINATION</b> , you must have a total of 8,000 hours experience. A minimum of 4,000 hours of this experience must have been in commercial plumbing. If your affidavits of experience are on file with the department, you do not need to submit additional affidavits.  All experience must have been for a registered contractor, and under the supervision of a certified plumber							
Effective July 1, 2006, 16 hours of approved continuing education, with a minimum of 4 hours Industry Related Electrical is required prior to testing.							
I hereby certify that the statements on this application are true and accurate to the best of my knowledge. (See WAC 296-400A-130 for penalties for false statements or material misrepresentations.)							
I declare under penalty of perjury under the laws of the State of Washington that the foregoing is true and correct:							
Date Signature of Applicant							

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# PLUMBER'S AFFIDAVIT OF EXPERIENCE

(Time frame cannot exceed 12 months per affidavit)

- > There can be no errors, whiteouts, alterations, or additions on the form. Only original affidavits will be accepted.
- > Time frame cannot exceed 12 months per affidavit
- ➤ Work in the commercial/journeyman category requires supervision in a one to one ratio (one journeyman plumber to one plumber trainee)
- ➤ Work in the residential/specialty category requires supervision in a two to one ratio (One certified plumber to two plumber trainees)
- ➤ See Chapter 18.106 RCW and Chapter 296-400A WAC for penalties for false statements or material misrepresentations.

Washington hours will	not be credited if yo	ou did r	ot have a current pl	lumber trainee certificate.	
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				the following verification. The	
I,				affirm and certify that	
Prii	nt Name of Contractor/U	nion Rep	presentative		
Print	t Name of Plumber Train		Trainee Certificate #		
Has worked for					
			or Training Program		
from	om to		performing plumbing work under the direct supervision		
Month/Day/Year	Month/Da	y/Year			
of a certified journeyman or	residential specialty p	lumber.	The experience was gain	ned in the category indicated below	
for the number of hours sho					
	Commercial/Journ	ieyman	hours		
Residential/Specialty		lty	l	hours	
Contractor/Union Representative Signature			Supervising Plumber Signature		
UBI or Registration Number			Certificate Number		
SUBSCRIBED AND SWORN TO BEFOR	RE ME ON THIS				
NOTARY PUBLIC IN AND FOR THE ST	TATE OF				
RESIDING IN					
MY COMMISSION EXPIRES ON					
NOTARY SIGNATURE					